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CONFIRMATION NO. 8914

<b>SERIAL NUMBER</b> 10/672,814	<b>FILING OR 371(c) DATE</b> 09/26/2003 <b>RULE</b>	<b>CLASS</b> 523	<b>GROUP ART UNIT</b> 1714	<b>ATTORNEY DOCKET NO.</b> 58698US002	
<b>APPLICANTS</b> Afshin Falsafi, Woodbury, MN; Rajdeep S. Kalgutkar, St. Paul, MN; Joel D. Oxman, Minneapolis, MN;					
<b>** CONTINUING DATA *****</b> <i>None</i>					
<b>** FOREIGN APPLICATIONS *****</b> <i>None</i>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 12/18/2003</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>Debra J. Miller</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> MN	<b>SHEETS DRAWING</b> 0	<b>TOTAL CLAIMS</b> 62	<b>INDEPENDENT CLAIMS</b> 9
<b>ADDRESS</b> 32692					
<b>TITLE</b> Dental compositions and methods with arylsulfinate salts					
<b>FILING FEE RECEIVED</b> 2010	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		